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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY, TRENTON DIVISION	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Ellynn	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Wetter	
	identification to your meeting with the trustee.	Wetter 9 Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3124	

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Debtor 1 Wetter, Ellynn Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names an Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live	61 Redwood Dr	If Debtor 2 lives at a different address:
		Ocean, NJ 07712-8711 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Monmouth	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 7. The chapter of the Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ■ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number District When Case number District When Case number 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing Yes. this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

Wetter, Ellynn

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Case number (if known)

12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busir	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numl	per, Street, City, State	& ZIP Code
	to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busine	ss (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as def	ined in 11 U.S.C. § 101(53A))
				Commodity Broker ((as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Chapter 11 of the under Substitution Bankruptcy Code, and are choosing to			V so that it can set ap ed under Subchapter V eral income tax return	urt must know whether you are a small business debtor or a debtor choosing to proceed propriate deadlines. If you indicate that you are a small business debtor or you are you must attach your most recent balance sheet, statement of operations, cash-flow or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
	For a definition of small	■ No.	Iam	not filing under Chapte	er 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and I down Subchapter V of Chapter 11.
		☐ Yes.			, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ubchapter V of Chapter 11.
Par	Report if You Own or	Have Any	Hazardo	us Property or Any I	Property That Needs Immediate Attention
4.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?	
	safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	Where i	s the property?		

Debtor 1 Wetter, Ellynn

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Debtor 1 Wetter, Ellynn Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Wetter, Ellynn			Case nu	ımber (if known)			
Part	6: Answer These Question	ons for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumindividual primarily for a personal, f		defined in 11 U.S.C.§ 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consumer debts or busine	ess debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,000			
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000			
		☐ 100-1 ☐ 200-9		□ 10,001-25,000	☐ More than100,000			
19.	How much do you	\$ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?	□ \$50,001 - \$100,000		\$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion			
		— \$500,	001 - \$1 million		_ more than too simon			
20.	How much do you	\$0 - \$	50,000	\$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50.000.001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
		. ,	001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion			
		— \$500,	001 - \$1 million					
Part	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
			chosen to file under Chapter 7, I an ode. I understand the relief available		ible, under Chapter 7, 11,12, or 13 of title 11, Unite to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this do have obtained and read the notice required by 11 U.S.C. § 342(b).					ot an attorney to help me fill out this document, I			
		I request	relief in accordance with the chapt	er of title 11, United States Code,	specified in this petition.			
		case can			or property by fraud in connection with a bankruptcy oth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
		Ellynn \		Signature of D	ebtor 2			
		Executed	July 7, 2020 MM / DD / YYYY	Executed on	MM / DD / YYYY			

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Debtor 1 Wetter, Ellynn Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

Bar number & State

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Peter J. Broege, Esq	Date	July 7, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
Peter J. Broege, Esq		
Printed name		
Broege Neumann Fischer & Shaver, L.L.C.		
Firm name		
25 Abe Voorhees Dr		
Manasquan, NJ 08736-3560		
Number, Street, City, State & ZIP Code		
Contact phase (722) 222 0404v207	Consil address	nhraaga@hnfahankruntay.com
Contact phone (732) 223-8484x207	Email address	pbroege@bnfsbankruptcy.com
023841982 NJ		

Certificate Number: 16199-NJ-CC-034366184



CERTIFICATE OF COUNSELING

I CERTIFY that on April 21, 2020, at 12:44 o'clock PM EDT, Ellynn Catherine Wetter received from CC Advising, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the District of New Jersey, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: April 21, 2020

By: /s/Kylie Nichols for Engels Cuevas

Name: Engels Cuevas

Title: Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Fill in this info	rmation to identify your case:		Ch	eck one box	only as d	irected in this form and	in Form
Debtor 1	Ellynn Wetter			2A-1Supp:			
Debtor 2				■ 1. There is	no pres	umption of abuse	
(Spouse, if filing)			11.			o determine if a presun	nntion of abuse
United States	Bankruptcy Court for the: District of New Journal Division	ersey, Trenton		applies	will be n	nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case number			'			does not apply now becout it could apply later.	ause of qualified
				☐ Check if	this is a	an amended filing	
Official F	Form 122A - 1						
Chaptei	7 Statement of Your Cu	rrent Mor	ithly Inc	ome			04/2
a separate shee number (if knov military service	and accurate as possible. If two married people et to this form. Include the line number to which wn). If you believe that you are exempted from a , complete and file Statement of Exemption from alculate Your Current Monthly Income	the additional infor presumption of ab	mation applies. use because you	On the top of u do not have	any addit primarily	ional pages, write your r consumer debts or beca	name and case luse of qualifying
1. What is	your marital and filing status? Check one o	nly.					
■ Not r	narried. Fill out Column A, lines 2-11.						
☐ Marr	ied and your spouse is filing with you. Fill o	ut both Columns	A and B, lines 2	2-11.			
☐ Marr	ied and your spouse is NOT filing with you.	You and your s	pouse are:				
□ Liv	ring in the same household and are not leg	ally separated. F	ill out both Colu	ımns A and E	, lines 2-	11.	
рe	ring separately or are legally separated. Fill enalty of perjury that you and your spouse are lebart for reasons that do not include evading the	gally separated ur	nder nonbankrup	otcy law that a	applies or		
101(10A). Fo 6 months, ad	verage monthly income that you received from a or example, if you are filing on September 15, the 6- dd the income for all 6 months and divide the total by the rental property, put the income from that property	month period would 6. Fill in the result.	be March 1 throu Do not include ar	igh August 31. ny income amo	If the amo unt more t	unt of your monthly incom than once. For example, if	e varied during the
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, eductions).	and commission	ns (before all	\$	0.00	\$	
	r and maintenance payments. Do not include B is filled in.	e payments from a	a spouse if	\$	0.00	\$	
of you of from an roomma	unts from any source which are regularly por your dependents, including child supportunmarried partner, members of your household tes. Include regular contributions from a spoundlude payments you listed on line 3	t. Include regular, , your dependents	contributions , parents, and	l. \$	0.00	\$	
5. Net inco	ome from operating a business, profession,						
_			otor 1				
	eceipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
	and necessary operating expenses thly income from a business, profession, or fa		Copy here ->	\$	0.00	\$	
	ome from rental and other real property			<u> </u>		*	
J. 110t 1110t		Deb	otor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
Net mon	thly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7 Interest	dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Debto	or 1 _	Wette	r, Ellynn			Case numbe	er (if known)			_
						Column A Debtor 1		Column B Debtor 2 or non-filing sp		
8.	Unen	mployn	nent compensation			\$	0.00	\$		
			the amount if you contend that the amount rerity Act. Instead, list it here:	eceived was a benefit ur	der the		_			
		or yours	spouse\$	934.0	00_					
9.	Pens under include Gove a men 61 of of ret	er the So de any de ernment ember of f title 10 tired pay	retirement income. Do not include any amorcial Security Act. Also, except as stated in the compensation, pension, pay, annuity, or allow in connection with a disability, combat-related the uniformed services. If you received any, then include that pay only to the extent that by to which you would otherwise be entitled if it than chapter 61 of that title.	ne next sentence, do not vance paid by the United d injury or disability, or o retired pay paid under ch it does not exceed the a	States death of napter mount	\$	0.00	\$		
10.	Do no under under coron crime pensi with a	ot includer the Fear the Navirus e againsion, pay a disabi	m all other sources not listed above. Spede any benefits received under the Social Sederal law relating to the national emergency ational Emergencies Act (50 U.S.C. 1601 edisease 2019 (COVID-19); payments receives thumanity, or international or domestic tery, annuity, or allowance paid by the United Stility, combat-related injury or disability, or dealervices. If necessary, list other sources on a	curity Act; payments madeclared by the Presider teq.) with respect to the das a victim of a war cororism; or compensation ates Government in control of a member of the	de nt ne rime, a n nection					
					_	\$	0.00	\$		
					_	\$	0.00	\$		
		Tot	al amounts from separate pages, if any.		+	\$	0.00	\$		
	each	i columi	our total current monthly income. Add lin n. Then add the total for Column A to the to	tal for Column B.	\$	0.00	+ \$		Total current month income	
Part	4	Dete	rmine Whether the Means Test Applies to	You						
12.		•	our current monthly income for the year.	·						
	12a.	Сору у	our total current monthly income from line 1	1		Сор	y line 11 h	ere=>	\$0.00	2
		Multiply	y by 12 (the number of months in a year)						x 12	_
	12b.	The res	sult is your annual income for this part of the	form				12b.	\$0.00	-
13.	Calc	ulate th	ne median family income that applies to y	ou. Follow these steps:						
	Fill in	the sta	ate in which you live.	NJ						
	Fill in	n the nu	mber of people in your household.	1						
	To fir	nd a list	edian family income for your state and size of applicable median income amounts, go st may also be available at the bankruptcy of	online using the link spe	ecified ir	n the separa	ite instruction	13. ons for this	\$69,705.00	<u> </u>
14.	How	do the	lines compare?							
	14a.	•	Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official		ck box	1T,here is no	presumptic	on of abuse.		
	14b.		Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A2.		he presu	ımption of al	buse is dete	ermined by For	rm 122A-2.	
Part			Below							
	_	By sign	ning here, I declare under penalty of perjury the	nat the information on thi	s staten	nent and in a	any attachm	ents is true an	d correct.	

X /s/ Ellynn Wetter

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Debtor 1	Wetter, Ellynn	Case number (if known)	
	Ellynn Wetter Signature of Debtor 1		
Da	Ate July 7, 2020 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	1.	

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Fill in this	information to identi	fy your case:		
Debtor 1	Ellynn Wetter First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Bank	cruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, TRENTON DIVISION	
Case number				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

	r original forms, you must fill out a new Summary and check the box at the top of this page.		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	923.14
	1c. Copy line 63, Total of all property on Schedule A/B	\$	923.14
Pa	t 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	42,562.58
	Your total liabilities	\$	42,562.58
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	934.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	900.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	ner sched	ules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	rsonal, fa	amily, or household

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Wetter, Ellynn Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.

\$ 0.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Documer	nt Page 14 of 57		
Fill in t	his information to ident	ify your case and this filing	g:		
Debtor 1	Ellynn Wetter			\neg	
Debtor 2	First Name	Middle Name	Last Name	}	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERS	SEY, TRENTON DIVISION		
Case number					Check if this is an amended filing
					3
Official Fo	orm 106A/B				
_	le A/B: Prop	nertv			12/15
			ce. If an asset fits in more than one category,	list the asset in the c	
think it fits best. I	Be as complete and accura re space is needed, attach	ate as possible. If two married	people are filing together, both are equally res . On the top of any additional pages, write your	sponsible for supplyi	ng correct
Part 1: Describe	e Each Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In		
1. Do you own or	have any legal or equitabl	e interest in any residence, bu	uilding, land, or similar property?		
No. Go to Pa	art 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	e Your Vehicles				
			cles, whether they are registered or not? I G: Executory Contracts and Unexpired Lease		you own that
3. Cars, vans, t	rucks, tractors, sport ut	ility vehicles, motorcycles			
■ No					
☐ Yes					
00					
			vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories	s	
■ No					
☐ Yes					
		•	ries from Part 2, including any entries for	pages	\$0.00
Davida Dagarila	- Varra Barra and Harra	ab ald Maria			
	e Your Personal and Hous have any legal or equit	able interest in any of the f	following items?	Cur	rent value of the
·		•	_	Do r	ion you own? not deduct secured ns or exemptions.
	oods and furnishings	linens, china, kitchenware			
■ No	ajor appliances, rumiture,	illiens, crima, kitchenware			
☐ Yes. Desc	cribe				
7. Electronics					
ir		lio, video, stereo, and digital e neras, media players, games	equipment; computers, printers, scanners; mu s	usic collections; elec	tronic devices
□ No					
■ Yes. Desc	iPhone 7	Plus			\$125.00

Official Form 106A/B Schedule A/B: Property page 1

Case 20-18335-KCF Doc 1 Filed 07/07/20 Entered 07/07/20 14:43:02 Page 15 of 57 Document Case number (if known) Debtor 1 Wetter, Ellynn 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$200.00 Used Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ■ No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for \$325.00 Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the

portion you own?
Do not deduct secured claims or exemptions.

16. **Cash**

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ No

☐ Yes....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

■ Yes......Institution name:

17.1. Checking Account TD Bank, Account No. Ending 6309

\$321.14

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De	ebtor 1	Wetter, Ellynn		Case number (if known)	
18.	Examp	mutual funds, or publicly tradecoles: Bond funds, investment account	I stocks nts with brokerage firms, money market accounts		
	■ No □ Yes	Institutio	on or issuer name:		
19.	Non-pu joint ve	•	in incorporated and unincorporated business	es, including an interest in an LL0	C, partnership, and
	■ No	enture			
	☐ Yes.	Give specific information about the	em		
		Name of en	tity:	% of ownership:	
20.	Negotia	<i>able instrument</i> s include personal c	other negotiable and non-negotiable instrumen hecks, cashiers' checks, promissory notes, and mo cannot transfer to someone by signing or delivering	oney orders.	
	_	Give specific information about ther	n		
		Issuer name	: :		
	Examp ■ No		h, 401(k), 403(b), thrift savings accounts, or other	pension or profit-sharing plans	
	⊔ Yes. I	List each account separately. Type of accour	nt: Institution name:		
22.	Your sh		e made so that you may continue service or use fro paid rent, public utilities (electric, gas, water), telec		6
			Institution name or individual:		
23.	Annuiti	es (A contract for a periodic payme	nt of money to you, either for life or for a number of	years)	
	■ No □ Yes	Issuer name and de	escription.		
		C. §§ 530(b)(1), 529A(b), and 529(b	ount in a qualified ABLE program, or under a quo)(1). I description. Separately file the records of any inter		
			property (other than anything listed in line 1), a	nd rights or powers exercisable f	or your benefit
	■ No □ Yes.	Give specific information about the	em		
26.			secrets, and other intellectual property es, proceeds from royalties and licensing agreemer	nts	
	☐ Yes.	Give specific information about the	em		
	Examp ■ No	es, franchises, and other general ples: Building permits, exclusive lice Give specific information about the	nses, cooperative association holdings, liquor licens	ses, professional licenses	
		property owed to you?		Cı	rrent value of the
IVIV	oney or p	property owed to you:		po Do	rtion you own? not deduct secured ims or exemptions.
	Tax refu	unds owed to you			
		Give specific information about ther	n, including whether you already filed the returns ar	nd the tax years	
			Anticipated 2019 Federal Income Tax Refund	Federal	\$184.00
					

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Debtor '	Wetter, Ellynn	Document	Page 17 of 57 Case number (if known	n)
		Anticipated 2019 NJ Sta Refund	ate Income Tax State	\$93.00
Exa ■ No			ort, maintenance, divorce settlement, propert	y settlement
Exa ■ No	unpaid loans you	ability insurance payments, disability benef made to someone else	its, sick pay, vacation pay, workers' compens	ation, Social Security benefits;
31. Inter	ests in insurance policion	es	SA); credit, homeowner's, or renter's insuranc	е
□ Ye		empany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If yo died ■ No	ou are the beneficiary of a l l.		d urance policy, or are currently entitled to receiv	e property because someone has
Exa ■ No	mples: Accidents, employ	whether or not you have filed a lawsuity rment disputes, insurance claims, or rights		
■ No	•	•	g counterclaims of the debtor and rights to	set off claims
■ No	financial assets you did o es. Give specific information	,		
		of your entries from Part 4, including an	ny entries for pages you have attached for	\$598.14
Part 5:	Describe Any Business-Re	elated Property You Own or Have an Interest	In. List any real estate in Part 1.	
■ No.	ou own or have any legal or Go to Part 6. . Go to line 38.	equitable interest in any business-related p	oroperty?	
		ommercial Fishing-Related Property You Ow st in farmland, list it in Part 1.	n or Have an Interest In.	
■ 1	ou own or have any legands. Go to Part 7. Ves. Go to line 47.	al or equitable interest in any farm- or c	commercial fishing-related property?	

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

page 4

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Deb	wetter, Ellynn		Case number (if known)	
	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership	t?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	hat number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$325.00		
58.	Part 4: Total financial assets, line 36	\$598.14		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$923.14	Copy personal property to	tal \$923.14
			ı	

\$923.14

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

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		D O O Gairrio	<u> </u>		
Fill in th	is information to identif	fy your case:			
Debtor 1	Ellynn Wetter				
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEI	RSEY, TRENTON DIVISION		
Case number (if known)					Check if this is an
					amended filing
Off: 2: 21 E2	1000				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own		Amount of the exemption you claim		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
iPhone 7 Plus Line from Schedule A/B 7.1	\$125.00		\$125.00	11 USC § 522(d)(3)	
Line Iron Schedule A/L 1.1			100% of fair market value, up to any applicable statutory limit		
Used Clothing Line from Schedule A/B 11.1	\$200.00		\$200.00	11 USC § 522(d)(3)	
Line Iron Schedule A/L 11.1			100% of fair market value, up to any applicable statutory limit		
TD Bank, Account No. Ending 6309 Line from Schedule A/B 17.1	\$321.14	•	\$321.14	11 USC § 522(d)(5)	
Line Holli Schedule A/L 11.1			100% of fair market value, up to any applicable statutory limit		
Anticipated 2019 Federal Income Tax Refund	\$184.00		\$184.00	11 USC § 522(d)(5)	
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
Anticipated 2019 NJ State Income	\$93.00		\$93.00	11 USC § 522(d)(5)	
Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit		

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De	btor 1	Wetter, Ellynn	Case number (if known)	
3.		you claiming a homestead exemption of more than \$170,350? bject to adjustment on 4/01/22 and every 3 years after that for cases filed on or afte	r the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 days bef	ore you filed this case?	
		□ No		
		☐ Yes		

Official Form 106C

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Fill in th	is information to identif	y your case:		
Debtor 1	Ellynn Wetter			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JEI	RSEY, TRENTON DIVISION	
Case number				
(if known)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

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		Docun	<u>nent Page 22 of 5</u>	o/	
Fill in this inf	ormation to identify you	r case:			
Debtor 1	Ellynn Wetter				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW	JERSEY, TRENTON DIVISIO	N	
Case number					
(if known)					Check if this is an
					mended filing
Official For	~ 106E/E				
Official For		ha Haya Unaa	oured Claims		12/15
	F: Creditors W			r creditors with NONPRIORITY clair	
Schedule G: Exect D: Creditors Who the Continuation F case number (if kn	utory Contracts and Unexp Have Claims Secured by Pr Page to this page. If you have	red Leases (Official Fori operty. If more space is re no information to repo	n 106G). Do not include any cred needed, copy the Part you need,	s on Schedule A/B: Property (Offici- ditors with partially secured claims , fill it out, number the entries in the On the top of any additional pages	that are listed in Schedule boxes on the left. Attach
	ors have priority unsecure				
■ No. Go to					
☐ Yes.					
Part 2: List A	All of Your NONPRIORIT	/ Unsecured Claims			
3. Do any credit	ors have nonpriority unsec	ured claims against you	?		
☐ No. You ha	ave nothing to report in this pa	art. Submit this form to the	court with your other schedules.		
Yes.					
unsecured cla	im, list the creditor separately	for each claim. For each	claim listed, identify what type of cl	each claim. If a creditor has more tha laim it is. Do not list claims already inc onpriority unsecured claims fill out the	luded in Part 1. If more
					Total claim
	ssist AR Solutions	Last 4 di	gits of account number		\$527.00
Nonpriori	ty Creditor's Name	When w	as the debt incurred?		
PO Bo	x 26095 #500				-
Colum	bus, OH 43226				
	Street City State Zip Code urred the debt? Check one.	As of the	e date you file, the claim is: Chec	ck all that apply	
_		П			
■ Debto	•	☐ Conti	-		
	or 2 only				
	st one of the debtors and and	_ :	tea NONPRIORITY unsecured claim:	<u>:</u>	
	st one of the debtors and and				
debt		•	ations arising out of a separation a	greement or divorce that you did not	
Is the cla	im subject to offset?	report as	priority claims		
■ No		☐ Debts	to pension or profit-sharing plans,	, and other similar debts	
☐ Yes		Other	Medical Collection Orthopaedics Pe	on Account for Seaview er Credit Report	_

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1 Wetter, Ellynn	Case number (f known)	
Best Buy Credit Services	Last 4 digits of account number	\$3,711.00
Nonpriority Creditor's Name Customer Service PO Box 790441	When was the debt incurred?	
Saint Louis, MO 63179-0441		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card Per Credit Report	
Care Credit	Last 4 digits of account number 9794	\$12,642.65
Nonpriority Creditor's Name Synchrony Bank - Bankruptcy Dept. PO Box 965060	When was the debt incurred?	
Orlando, FL 32896-5060 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The same year me, and committee concern an anatoppi,	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Credit Card - Litigation Pending by Midland Funding, LLC - Docket No. MON-DC-12399-19	
DSW - Comenity Bank	Last 4 digits of account number 2299	\$2,042.31
Nonpriority Creditor's Name Bankruptcy Department PO Box 182125	When was the debt incurred?	
Columbus, OH 43218-2125 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Credit Card - Litigation Pending by Portfolio Recovery Associates - Docket No. MON-DC-1636-19	

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Debto	Wetter, Ellynn	Case number (f known)	
4.5	JC Penney - Synchrony Bank	Last 4 digits of account number 4297	unknown
	Nonpriority Creditor's Name Bankruptcy Department PO Box 965060	When was the debt incurred?	
	Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Listed In The Event of Claim Due After Litigation Settled and Dismissed - Docket No. MON-DC-9909-18	
4.6	Jersey Shore Neurology Associates	Last 4 digits of account number	\$51.45
	Nonpriority Creditor's Name	When was the debt incurred?	
	1900 State Route 33 Neptune, NJ 07753-4800		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	
	Lord & Taylor - Cap One Retail		
4.7	Services Nonpriority Creditor's Name	Last 4 digits of account number 1113	\$3,269.56
	Customer Service PO Box 30258	When was the debt incurred?	
	Salt Lake City, UT 84130-0258 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	-	Credit Card - Litigation Pending by	
	Пурс	Midland Funding, LLC - Docket No. Other Specify MON-DC-3831-30	

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Debto	or 1 Wetter, Ellynn	Case number (f known)				
4.8	Macy's	Last 4 digits of account number 6678	\$3,225.33			
	Nonpriority Creditor's Name Bankruptcy Dept PO Box 8053	When was the debt incurred?				
	Mason, OH 45040-8053					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes					
	☐ Yes	■ Other. Specify Charged Off Credit Card Per Credit Report				
4.9	Merrick Bank	Last 4 digits of account number	\$842.00			
	Nonpriority Creditor's Name Customer Service	When was the debt incurred?				
	PO Box 9201 Old Bethpage, NY 11804-9001					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card Per Credit Report				
4.10	Midland Funding, LLC	Last 4 digits of account number	\$3,270,00			
	Nonpriority Creditor's Name					
	8875 Aero Dr Ste 200	When was the debt incurred?				
	San Diego, CA 92123-2255					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Collection Account for Capital One NA Per Other. Specify Credit Report				

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Debto	^{r 1} Wetter, Ellynn	Case number (if known)				
4.11	Nordstrom	Last 4 digits of account number 7971	\$6,394.00			
	Nonpriority Creditor's Name Customer Service PO Box 6555	When was the debt incurred?				
	Englewood, CO 80155-6555					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Charged Off Credit Card Per Credit Report				
4.12	Portfolio Recovery Associates LLC	Last 4 digits of account number	\$545.00			
2	Nonpriority Creditor's Name		φ343.00			
		When was the debt incurred?				
	PO Box 12914					
	Norfolk, VA 23541-0914 Number Street City State Zip Code	As of the data you file the claim is Chook all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	_	П				
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Unknown Collection Account				
4.13	Simon's Agency, Inc	Last 4 digits of account number	\$104.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 5026					
	Syracuse, NY 13220-5026					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Medical Collection Accounts for Meridian Other. Specify Medical Group Primary Per Credit Report				

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Debto	Metter, Ellynn	Case number (if known)	
4.14	Target National Bank	Last 4 digits of account number 9454	\$2,938.28
	Nonpriority Creditor's Name Target Credit Services PO Box 1581	When was the debt incurred?	
	Minneapolis, MN 55440-1581 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Charged Off Credit Card Per Credit Report	
4.15	TD Bank Card Services	Last 4 digits of account number	\$3,000.00
	Nonpriority Creditor's Name Customer Service PO Box 84037	When was the debt incurred?	
	Columbus, GA 31908-4037		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Per Credit Report	
4.16	TJX Rewards - Synchrony Bank	Last 4 digits of account number 1478	unknown
	Nonpriority Creditor's Name Bankruptcy Dept PO Box 965060	When was the debt incurred?	
	Orlando, FL 32896-5060 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Credit Card - Listed In The Event of Claim	
	☐ Yes	Due After Litigation Settled and Dismissed Other. Specify - Docket No. MON-DC-9545-18	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Case number (if known) Debtor 1 Wetter, Ellynn have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? **Capital One** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Bankruptcy Claims Servicer** ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 30285 Salt Lake City, UT 84130-0285 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One - Bankruptcy Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Department ■ Part 2: Creditors with Nonpriority Unsecured Claims c/o American Info Source PO Box 54529 Oklahoma City, OK 73154-1529 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Meridian Medical Group Primary** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 416923 ■ Part 2: Creditors with Nonpriority Unsecured Claims Boston, MA 02241-6923 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Funding, LLC Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims for Cap One/Lord & Taylor ■ Part 2: Creditors with Nonpriority Unsecured Claims 350 Camino De La Reina, Ste 100 San Diego, CA 92108 Last 4 digits of account number 1113 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Funding, LLC Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Asignee of Care Credit/Synchrony ■ Part 2: Creditors with Nonpriority Unsecured Claims 350 Camino De La Reina, Ste 100 San Diego, CA 92108 Last 4 digits of account number 9794 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Portfolio Recovery Associates LLC Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims For DSW Part 2: Creditors with Nonpriority Unsecured Claims PO Box 12914 Norfolk, VA 23541-0914 Last 4 digits of account number 2299 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Pressler Felt & Warshaw, LLP Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attys For Midland Funding ■ Part 2: Creditors with Nonpriority Unsecured Claims #W180179 7 Entin Rd Parsippany, NJ 07054-5020 Last 4 digits of account number 1113 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Pressler Felt & Warshaw, LLP Line **4.3** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Attys Midland/Care Credit** ■ Part 2: Creditors with Nonpriority Unsecured Claims #W180183 7 Entin Rd Parsippany, NJ 07054-5020 Last 4 digits of account number 9794 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Seaview Orthopaedic** Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1200 Eagle Ave Part 2: Creditors with Nonpriority Unsecured Claims Ocean, NJ 07712-7631 Last 4 digits of account number

Official Form 106 E/F

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

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Thomas Murtha, Esq. **Portfolio Recovery Assoc** 120 Corporate Blvd Norfolk, VA 23502-4962

Line 4.4 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

2299

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. 6h.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts		*	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	42,562.58
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	42,562.58

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Fill in th					
Debtor 1	Ellynn Wetter				
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEW JE	RSEY, TRENTON DIVISION		
Case number (if known)					☐ Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	nt Page 31 o	15/	
Fill	I in this information to identi	y your case:			
Debtor 1	Ellynn Wetter				
Debior 1	Ellynn Wetter First Name	Middle Name	Last Name	 }	
Debtor 2					
(Spouse if, filin	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY, TRENTON DIVIS	SION	
Case numb	per				
(if known)					☐ Check if this is an
					amended filing
Sched Codebtors are filing to	gether, both are equally resp	e also liable for any debt	rrect information. If mo	re space is needed, co	as possible. If two married people py the Additional Page, fill it out, itional Pages, write your name and
	er (if known). Answer every o		ionai i age to tilis page.	On the top of any Add	monar rages, write your name and
1. Do y	you have any codebtors? (If y	ou are filing a joint case, do	o not list either spouse as	a codebtor.	
■ No □ Yes					
□ res					
	nin the last 8 years, have you nia, Idaho, Louisiana, Nevada,				states and territories include Arizona,
_	Go to line 3. Did your spouse, former spou	se, or legal equivalent live w	rith you at the time?		
3 In Colu	umn 1. list all of your codebte	ors. Do not include your	snouse as a codebtor if	vour spouse is filing w	rith you. List the person shown in
line 2 a	again as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	you have listed the cre	editor on Schedule D (Official Forn
	Column 1: Your codebtor Jame, Number, Street, City, State and Z	IP Code		Column 2: The cred	ditor to whom you owe the debt
				Officer all scriedules	з тат арргу.
3.1				☐ Schedule D, line	
	Name			□ Schedule E/F, lir	ne
				☐ Schedule G, line	
1	Number Street			_	
(City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			_ ☐ Schedule E/F, lir	
				☐ Schedule G, line	
_	Number Street			_	
	Number Street City	State	ZIP Code		

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=:11	in this information to identify								
	in this information to identify your captor 1 Ellynn Wette								
_	btor 2 buse, if filing)				_				
Uni	ited States Bankruptcy Court for the:	DISTRICT OF NEW	JERSEY, TRENTON I	DIVISION	_				
	se number nown)		-				nt showing po		:hapter 13
\cap	fficial Form 106l						f the following	date:	
	chedule I: Your Inco	me				MM / DD/ Y	YYY		12/1
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O The separate sheet to this form. O	spouse is not filing wit	h you, do not includ	e informa	ation about	your spou	se. If more sp	ace is ne	eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	spouse	
	If you have more than one job,	Employment status	☐ Employed			☐ Emplo	yed		
	attach a separate page with information about additional employers.	. ,	■ Not employed			☐ Not er	mployed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student or homemaker, if it applies.	. Employer's address							
		How long employed to	here?			. <u> </u>			
Pa	rt 2: Give Details About Mon	thly Income							
	mate monthly income as of the dates so you are separated.	te you file this form. If y	ou have nothing to rep	ort for any	y line, write \$	60 in the spa	ice. Include yo	ur non-filin	g spouse
•	u or your non-filing spouse have more ce, attach a separate sheet to this forn		bine the information fo	r all emplo	oyers for that	person on	the lines below	v. If you ne	ed more
					For De	ebtor 1	For Debtor		
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

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Debto	or 1	Wetter, Ellynn	_	Case n	umber (if known)			
				For D	Debtor 1		ebtor 2 or ing spouse	
	Cop	by line 4 here	4.	\$	0.00	\$	N/A	
5.	List	t all payroll deductions:						
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5a. 5b.	ş ^ω —	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	<u>\$</u> —	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$—	0.00	\$	N/A	
	5e.	Insurance	5e.	<u>\$</u> —	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	<u>\$</u> —	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
				Ť —		· —		
7.	Cai	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	¢	0.00	\$	N/A	
	Oh	Interest and dividends	8b.	\$ <u> </u>	0.00	\$	N/A	
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Ψ	0.00	Φ	<u>N/A</u>	
		settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	934.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	— _{8g.}	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	934.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.	10. \$		934.00 + \$_		N/A = \$934	.00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify:	ependent		•			.00
12.		d the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain			•		12. \$ 934	00
13.	Do :	you expect an increase or decrease within the year after you file this form	?				Combined monthly incon	e
10.		No.	•					

Official Form 106l Schedule I: Your Income page 2

Fill in	n this information to identify your case:				
Debto	or 1 Ellynn Wetter		Chec	ck if this is:	
Debto			_	An amended filing	ing postpotition abouter 12
	use, if filing)			expenses as of the	ing postpetition chapter 13 following date:
Unite	ed States Bankruptcy Court for the: DISTRICT OF NEW JERSEY DIVISION	, TRENTON	-	MM / DD / YYYY	
Case (If kno	e number nown)				
	ficial Form 106J				
	chedule J: Your Expenses				12/1
infor	as complete and accurate as possible. If two married people rmation. If more space is needed, attach another sheet to th nown). Answer every question.				
Part 1.	1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	ses for Separate Househo	oldof Debtor	· 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information feach dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.			-	☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No ☐ Yes				_ 100
Part Estir	2: Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unles	ss you are using this forn	n as a sup	plement in a Chapt	ter 13 case to report
	enses as of a date after the bankruptcy is filed. If this is a sulicable date.	upplemental Schedule J,	check the	box at the top of the	ne form and fill in the
valu	ude expenses paid for with non-cash government assistance of such assistance and have included it on Schedule 1: Yo icial Form 1061.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgage	4. \$	i	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$;	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
5	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as	s home equity loans	4d. \$ 5. \$		0.00

lectricity, heat, natural gas leater, sewer, garbage collection elephone, cell phone, Internet, satellite, and cable services ther. Specify: Ind housekeeping supplies re and children's education costs g, laundry, and dry cleaning al care products and services and dental expenses portation. Include gas, maintenance, bus or train fare. Include car payments. Inment, clubs, recreation, newspapers, magazines, and books bele contributions and religious donations ce. Include insurance deducted from your pay or included in lines 4 or 20. In fe insurance ehicle insurance ehicle insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Internet or lease payments: are payments for Vehicle 1 are payments for Vehicle 2 ther. Specify: Internet of alimony, maintenance, and support that you did not report the from your pay on line 5, Schedule I, Your Income (Official Form 106)	6a. \$	0.00 0.00 100.00 400.00 0.00 50.00 100.00 225.00 0.00 25.00 0.00 0.00 0.00 0
deterricity, heat, natural gas dater, sewer, garbage collection delephone, cell phone, Internet, satellite, and cable services ther. Specify: dd housekeeping supplies re and children's education costs g, laundry, and dry cleaning al care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. nelude car payments. nment, clubs, recreation, newspapers, magazines, and books tole contributions and religious donations tole. nelude insurance deducted from your pay or included in lines 4 or 20. fe insurance ealth insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. lent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: tyments of alimony, maintenance, and support that you did not report	6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 16. \$ 17a. \$ 17b. \$ 17c. \$ 17c	0.00 100.00 400.00 400.00 50.00 100.00 225.00 0.00 25.00 0.00 0.00 0.00 0
rater, sewer, garbage collection elephone, cell phone, Internet, satellite, and cable services ther. Specify: Ind housekeeping supplies re and children's education costs g, laundry, and dry cleaning al care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. Include car payments. Inment, clubs, recreation, newspapers, magazines, and books tole contributions and religious donations ce. Include insurance deducted from your pay or included in lines 4 or 20. Include insurance ealth insurance ealth insurance ther insurance. Specify: Inco not include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in	6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 16. \$ 17a. \$ 17b. \$ 17c. \$ 17c	0.00 100.00 400.00 400.00 50.00 100.00 225.00 0.00 25.00 0.00 0.00 0.00 0
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ther. Specify: Ind housekeeping supplies Ire and children's education costs Ig, laundry, and dry cleaning Id care products and services Ind dental expenses Intation. Include gas, maintenance, bus or train fare. Include car payments. Inment, clubs, recreation, newspapers, magazines, and books Include insurance deducted from your pay or included in lines 4 or 20. Ife insurance Include insurance Included in lines 4 or 20. Included	6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 17a. \$ 17b. \$ 17b. \$ 17c. \$	0.00 400.00 50.00 100.00 225.00 0.00 25.00 0.00 0.00 0.00 0
Ind housekeeping supplies In and children's education costs In and care products and services In and dental expenses Intation. Include gas, maintenance, bus or train fare. Include car payments. Inment, clubs, recreation, newspapers, magazines, and books Include insurance deducted from your pay or included in lines 4 or 20. Include insurance Include taxes deducted from your pay or included in lines 4 or 20. Include insurance Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes payments: Include taxes deducted from your pay or included in lines 4 or 20. Include taxes payments: Include taxes deducted from your pay or included in lines 4 or 20. Include taxes payments: Include insurance Incl	7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15d. \$ 16. \$ 17a. \$ 17b. \$ 17b. \$ 17b. \$ 17b. \$ 17b. \$	400.00 0.00 50.00 100.00 225.00 0.00 25.00 0.00 0.00 0.00 0.00 0.00
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and care products and services and dental expenses protation. Include gas, maintenance, bus or train fare. Include car payments. Include car payments. Include car payments. Include incurrence and religious donations Include insurance deducted from your pay or included in lines 4 or 20. Include insurance Include in lines 4 or 20. Include insurance Inclu	10. \$	100.00 225.00 0.00 0.00 25.00 0.00 0.00 0
and dental expenses protation. Include gas, maintenance, bus or train fare. Include car payments. Include, recreation, newspapers, magazines, and books pole contributions and religious donations ce. Include insurance deducted from your pay or included in lines 4 or 20. Include insurance ealth insurance ehicle insurance ther insurance. Specify: Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes payments: Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. Include taxes deducted from your pay or included in lines 4 or 20. I	11. \$	225.00 0.00 0.00 25.00 0.00 0.00 0.00 0.00 0.00
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nclude car payments. nment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. nclude insurance deducted from your pay or included in lines 4 or 20. fe insurance ealth insurance ehicle insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. lent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: lyments of alimony, maintenance, and support that you did not report	13. \$	0.00 25.00 0.00 0.00 0.00 0.00
nment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. nclude insurance deducted from your pay or included in lines 4 or 20. fe insurance ealth insurance ehicle insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: eyments of alimony, maintenance, and support that you did not report	13. \$	0.00 25.00 0.00 0.00 0.00 0.00
ce. nclude insurance deducted from your pay or included in lines 4 or 20. fe insurance ealth insurance ehicle insurance ther insurance. Specify: On not include taxes deducted from your pay or included in lines 4 or 20. Therefore the insurance of the insurance of the insurance of the insurance. Specify: Therefore the insurance of the insurance	14. \$	0.00 0.00 0.00 0.00 0.00
ce. nclude insurance deducted from your pay or included in lines 4 or 20. fe insurance ealth insurance ehicle insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: eyments of alimony, maintenance, and support that you did not report	15a. \$	0.00 0.00 0.00 0.00 0.00
noclude insurance deducted from your pay or included in lines 4 or 20. fe insurance ealth insurance ehicle insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. The payments of Vehicle 1 ar payments for Vehicle 2 ther. Specify: The payments of alimony, maintenance, and support that you did not report to the insurance insurance.	15b. \$	0.00 0.00 0.00 0.00
fe insurance ealth insurance ehicle insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: syments of alimony, maintenance, and support that you did not report	15b. \$	0.00 0.00 0.00 0.00
ealth insurance ehicle insurance ther insurance. Specify: On not include taxes deducted from your pay or included in lines 4 or 20. ent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: syments of alimony, maintenance, and support that you did not report	15b. \$	0.00 0.00 0.00 0.00
ehicle insurance ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. ent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: syments of alimony, maintenance, and support that you did not report	15c. \$	0.00 0.00 0.00
ther insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. The sent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: tyments of alimony, maintenance, and support that you did not report	15d. \$	0.00 0.00 0.00
Do not include taxes deducted from your pay or included in lines 4 or 20. Lent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: lyments of alimony, maintenance, and support that you did not report	16. \$17a. \$17b. \$17c. \$	0.00
ent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: lyments of alimony, maintenance, and support that you did not report	17a. \$ 17b. \$ 17c. \$	0.00
ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther. Specify: yments of alimony, maintenance, and support that you did not report	17b. \$ 17c. \$	
ar payments for Vehicle 2 ther. Specify: ther. Specify: yments of alimony, maintenance, and support that you did not report	17b. \$ 17c. \$	
ther. Specify: ther. Specify: yments of alimony, maintenance, and support that you did not report	17c. \$	0.00
ther. Specify: yments of alimony, maintenance, and support that you did not report		
yments of alimony, maintenance, and support that you did not report	474 ¢	0.00
	17d. \$	0.00
ia nom your pay on mie 3, schedule 1, rour meome (omelai i omi 100		0.00
ayments you make to support others who do not live with you.	si).	0.00
-,	19.	0.00
eal property expenses not included in lines 4 or 5 of this form or on So		ne.
ortgages on other property	20a. \$	0.00
eal estate taxes	20b. \$	0.00
	·	0.00
		0.00
		0.00
	· —	
ррсопу.	∠1. † ⊅	0.00
te your monthly expenses		j
d lines 4 through 21.	\$	900.00
by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	J-2 \$	
		900.00
	L ^Ψ –	300.00
		
	23a. \$	934.00
opy your monthly expenses from line 22c above.	23b\$	900.00
	230 \$	34.00
֡	roperty, homeowner's, or renter's insurance laintenance, repair, and upkeep expenses omeowner's association or condominium dues Specify: te your monthly expenses d lines 4 through 21. py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106 d line 22a and 22b. The result is your monthly expenses. te your monthly net income. opy line 12 (your combined monthly income) from Schedule I. opy your monthly expenses from line 22c above. ubtract your monthly expenses from your monthly income. he result is your monthly net income.	aintenance, repair, and upkeep expenses omeowner's association or condominium dues Specify: 20e. \$ 20e. \$ 21. +\$ te your monthly expenses d lines 4 through 21. py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 d line 22a and 22b. The result is your monthly expenses. te your monthly net income. opy line 12 (your combined monthly income) from Schedule I. opy your monthly expenses from line 22c above. 23a. \$ 23b\$ ubtract your monthly expenses from your monthly income.

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Fill in this ir	nformation to identify yo	our case:			
Debtor 1	Ellynn Wetter				
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JER	RSEY, TRENTON DIVISION		
Case number					
(if known)				☐ Check if amende	f this is an ed filing
Official Forr Declara t		ın Individual	Debtor's Sche	edules	12/15
If two married pe	eople are filing together,	both are equally respons	sible for supplying correct inf	ormation.	
obtaining money		connection with a bankru		ng a false statement, concealing pr s up to \$250,000, or imprisonment f	
Sig	n Below				
Did you pa	y or agree to pay some	one who is NOT an attorno	ey to help you fill out bankru	ptcy forms?	
■ No					
☐ Yes. N	Name of person			Attach Bankruptcy Petition Prep	
				Declaration, and Signature (Office	cial Form 119)
•	Ity of perjury, I declare t e true and correct.	that I have read the summ	ary and schedules filed with	this declaration and	
X /s/ Fllv	nn Wetter		Х		
Ellynn	Wetter re of Debtor 1		Signature of Debto	or 2	

Date **July 7, 2020**

Date

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Fill in this	s information to ident	ify your case:		
Debtor 1	Ellynn Wetter]
	First Name	Middle Name	Last Name	}
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	DISTRICT OF NEV	N JERSEY, TRENTON DIVISION	
Case number				1
(if known)				☐ Check if this is an
				amended filing
Official For Statemen		on for Indiv	riduals Filing Under Chap	ter 7 12/15
If you are an indiv	idual filing under cha	pter 7, you must fill o	out this form if:	
creditors have	claims secured by yo	ur property, or		
	d personal property a			
	er is earlier, unless th		ou file your bankruptcy petition or by the date se time for cause. You must also send copies to the	
	ple are filing together the form.	in a joint case, both	are equally responsible for supplying correct in	formation. Both debtors must sign
	nd accurate as possib ur name and case nur		eeded, attach a separate sheet to this form. On the	ne top of any additional pages,
Part 1: List You	ur Creditors Who Hav	e Secured Claims		
For any creditor information below		art 1 of Schedule D:	Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
Identify the cred	ditor and the property t	that is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	-
			☐ Retain the property and enter into a Reaffirmation	n ☐ Yes
Description of			Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:				

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

Description of

securing debt:

name:

property

Creditor's

name:

property

☐ Surrender the property.

☐ Surrender the property.

☐ Surrender the property.

Agreement.

Agreement.

☐ Retain the property and redeem it.

 \square Retain the property and [explain]:

☐ Retain the property and redeem it.

☐ Retain the property and [explain]:

☐ Retain the property and enter into a *Reaffirmation*

☐ Retain the property and enter into a *Reaffirmation*

☐ No

☐ Yes

□ No

☐ Yes

☐ No

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Debtor 1	Wetter, Ellynn	Case number (if known)	
name:		☐ Retain the property and redeem it.	□Yes
Danamin	ation of	☐ Retain the property and enter into a <i>Reaffirmation</i>	
propert	ption of	Agreement.	
securin	•	☐ Retain the property and [explain]:	
Scourin	ig dobt.		_
Part 2:	List Your Unexpired Personal Property	Leases	
For any u	nexpired personal property lease that you nation below. Do not list real estate lease	ou listed in Schedule G: Executory Contracts and Unexpired I s. Unexpired leases are leases that are still in effect; the lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	eases (Official Form 106G), fill in e period has not yet ended. You
Describe	your unexpired personal property lease	s	Will the lease be assumed?
Lessor's r			□ No
	on of leased		_
Property:			☐ Yes
Lessor's r			□ No
	on of leased		
Property:			☐ Yes
Lessor's r	name:		□ No
	on of leased		П.,
Property:			☐ Yes
Lessor's r			□ No
Description Property:	on of leased		
i Toperty.			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
r roporty.			⊔ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name:		□ No
	on of leased		
Property:			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indic that is subject to an unexpired lease.	cated my intention about any property of my estate that secu	res a debt and any personal
	Ellynn Wetter	X Signature of Debtor 2	
	nn Wetter	Signature of Debtor 2	
Sign	nature of Debtor 1		
Date	July 7, 2020	Date	

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	F::11-2		:6			
		information to ident	ity your case:			
De	btor 1	Ellynn Wetter First Name	Middle Name	Last Name		
De	btor 2					
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bar	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY, TRENTON DIVISION		
	se number					Check if this is an
					a	mended filing
<u>O</u> 1	ficial For	rm 107				
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
info	rmation. If mo				qually responsible for supply additional pages, write your i	
` Pa	rt 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	☐ Married					
	■ Not mari	ried				
2.	During the la	st 3 years, have you	lived anywhere other than v	where you live now?		
	■ No					
	☐ Yes. List	all of the places you live	ved in the last 3 years. Do not	nclude where you live now.		
	Debtor 1 Pri	or Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					y property state or territory? co, Texas, Washington and Wis	
	■ No					
	_	ke sure you fill out <i>Sch</i>	edule H: Your Codebtors (Offi	cial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a nave income that you receive to	Il businesses, including part-		ar years?
	□ No					
		in the details.				
	— 103.1111	in the details.				
			Debtor 1	0	Debtor 2	0
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calendar inuary 1 to Dec	year: cember 31, 2019)	■ Wages, commissions, bonuses, tips	\$2,200.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

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Debtor 1 N	/etter, Ellynn		Cas	e number (if known)	
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ndar year before that: o December 31, 2018)	■ Wages, commissions, bonuses, tips	\$26,984.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
Include in other pub you are fil	ncome regardless of whe lic benefit payments; per ling a joint case and you	me during this year or the two pather that income is taxable. Exampasions; rental income; interest; diverse income that you received togother from each source separately	ples of other income are alim- ridends; money collected from gether, list it only once under I	lawsuits; royalties; and gaml Debtor 1.	
п.,					
□ No					
Yes	. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
	y 1 of current year unt filed for bankruptcy:	il Social Security - Year to Date	\$4,670.00		
For last cale	ndar year: o December 31, 2019)	Social Security - 2019	\$7,352.00		
Part 3: Lis	st Certain Payments Yo	ou Made Before You Filed for B	ankruptcy		
. Are eithe No.	Neither Debtor 1 nor	2's debts primarily consumer of Debtor 2 has primarily consur a personal, family, or household p	mer debts. Consumer debts	are defined in 11 U.S.C. § 10	01(8) as "incurred by an
	During the 90 days be	fore you filed for bankruptcy, did y	vou pay any creditor a total of	\$6.825* or more?	
	□ No. Go to line		, , , ,	. ,	
	creditor. payments	v each creditor to whom you paid Do not include payments for dom s to an attorney for this bankruptcy	nestic support obligations, su y case.	ch as child support and alim	
	* Subject to adjustme	ent on 4/01/22 and every 3 years a	after that for cases filed on or	after the date of adjustment.	
Yes		or both have primarily consurtions fore you filed for bankruptcy, did y		\$600 or more?	
	■ No. Go to line	e 7.			
	☐ Yes List below payments	v each creditor to whom you paid s for domestic support obligations ruptcy case.			
Credito	r's Name and Address	Dates of navme	nt Total amount	Amount you Was thi	is navment for

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De	wetter, Ellynn		Cas	e number (if known)		
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part which you are an officer, director, person in corbusiness you operate as a sole proprietor. 11 L	tners; relatives of any gener ntrol, or owner of 20% or m	ral partners; partnershi ore of their voting secu	ps of which you are rities; and any man	e a general partner; corporation aging agent, including one for	а
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cosign.		yments or transfer ar	y property on ac	count of a debt that benefite	d an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
Pa	rt 4: Identify Legal Actions, Repossession	ns and Foreclosures				
	□ No ■ Yes. Fill in the details. Case title	Nature of the case	Court or agency		Status of the case	
	Case number		- ,			
	Portfolio Recovery Associates (Comenity Bank/DSW) v. Ellynn	Contract	Superior Court Civil Part	: - Special	Pending	
	Wetter		Monmouth Co		☐ On appeal☐ Concluded☐	
	MON-DC-1636-19		Freehold, NJ 0	7728 		
	Midland Funding, LLC (Capital	Contract	Superior Court	- Special	■ Pending	
	One/Lord & Taylor) v. Ellynn Wetter		Civil Part Monmouth Co	intv	☐ On appeal	
	MON-DC-2831-20		Freehold, NJ 0		☐ Concluded	
	Synchrony Bank (TJX Rewards) v.	Contract	Superior Court	- Special	☐ Pending	
	Ellynn Wetter		Civil Part	•	☐ On appeal	
	MON-DC-9545-18		Monmouth Cou Freehold, NJ 0		Concluded	
			·		Settled & Dismissed 9	/5/19
	Synchrony Bank (JCPenney) v.	Contract	Superior Court	- Special	☐ Pending	
	Ellynn Wetter		Civil Part	-	☐ On appeal	
	MON-DC-9909-18		Monmouth Cou Freehold, NJ 0		Concluded	
					Settled & Dismissed o	n

Superior Court - Special

Monmouth County

Freehold, NJ 07728

Civil Part

Pending

☐ On appeal

☐ Concluded

Contract

Midland Funding, LLC (Synchrony

Bank/Care Credit) v. Ellynn Wetter

MON-DC-12399-19

Case 20-18335-KCF Doc 1 Filed 07/07/20 Entered 07/07/20 14:43:02 Desc Main Page 42 of 57 Document Case number (if known) Debtor 1 Wetter, Ellynn 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the Describe the Property Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was **Amount** taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Value Dates you gave the gifts person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No Yes. Fill in the details.

Address

transferred

Description and value of any property

Amount of

payment

Date payment or

transfer was

made

Person Who Made the Payment, if Not You

Person Who Was Paid

Email or website address

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De	btor 1 Wetter, Ellynn		Case n	number (if known)	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and transferred	value of any property	Date payment or transfer was made	Amount of payment
	Peter J. Broege, Esq. 25 Abe Voorhees Dr Manasquan, NJ 08736-3560				\$1,800.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you l	s or to make payment		pay or transfer any prope	rty to anyone who
	□ No ■ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and transferred	value of any property	Date payment or transfer was made	Amount of payment
	Brownstone Law Group, PC PO Box 629 Orange, CA 92856-6629	were reached (Banana Repi	ent Program. Settleme with Synchrony Banl ublic) in June, 2018 ar g (Capital One ending ary, 2019	k Payments of nd \$525 Per	\$14,700.00
18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your burnclude both outright transfers and transfers madgifts and transfers that you have already listed or No Yes. Fill in the details.	usiness or financial aff de as security (such as	fairs?		
	Person Who Received Transfer Address Person's relationship to you	Description and property transfe	erred pay	scribe any property or yments received or debts id in exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No Yes. Fill in the details.		ny property to a self-sett	eled trust or similar device	of which you are a
	Name of trust	Description and	value of the property tra	ansferred	Date Transfer was made
Pa	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Depos	it Boxes, and Storage Un	its	
20.	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	r other financial accou	ınts; certificates of depos		, ,
	Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold.	Last balance before

Code)

moved, or transferred

Filed 07/07/20 Entered 07/07/20 14:43:02 Desc Main Document Page 44 of 57 Debtor 1 Case number (if known) Wetter, Ellynn 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Describe the contents Name of Financial Institution Who else had access to it? Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Nο Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. Where is the property? (Number, Street, City, State and ZIP Owner's Name Describe the property Value Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Governmental unit Environmental law, if you Date of notice Name of site Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice

Address (Number, Street, City, State and

ZIP Code)

know it

Address (Number, Street, City, State and ZIP Code)

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Document Page 45 of 57 Debtor 1 Wetter, Ellynn Case number (if known) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ellynn Wetter Signature of Debtor 2 **Ellynn Wetter** Signature of Debtor 1 Date Date July 7, 2020 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey, Trenton Division

In re	e Wetter, Ellynn		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMI	PENSATION OF ATTO	RNEY FOR I	EBTOR	
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy,	or agreed to be pai	d to me, for services rend	lered or to
	For legal services, I have agreed to accept		\$	1,800.00	
	Prior to the filing of this statement I have received	ed	\$	1,800.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed confirm.	mpensation with any other person	unless they are men	nbers and associates of n	ıy law
	☐ I have agreed to share the above-disclosed competed copy of the agreement, together with a list of the state of the sta				firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy	case, including:	
1	a. Analysis of the debtor's financial situation, and rerb. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of credd. [Other provisions as needed]	tatement of affairs and plan which	may be required;		ptcy;
6.]	By agreement with the debtor(s), the above-disclosed Representation of the Debtor(s) in an the Trustee after the initial meeting of Bankruptcy Rule 2004 which services	adversary proceeding, conte creditors, or at an examination	sted motion, add on of the Debtor		
		CERTIFICATION			
	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for	payment to me for	representation of the deb	otor(s) in
J	July 7, 2020	/s/ Peter J. Broege	e, Esq		_
\overline{D}	Date	Peter J. Broege, E			-
		Signature of Attorney Broege Neumann		r, L.L.C.	
		25 Abe Voorhees	Dr		
		Manasquan, NJ 08	3736-3560		
		(732) 223-8484x20 pbroege@bnfsbar		3-2416	
		Name of law firm	iki upicy.com		-

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 20-18335-KCF B201B (Form 201B) (12/09)

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United States Bankruptcy Court District of New Jersey, Trenton Division

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IN RE:		Case No.
Wetter, Ellynn		Chapter 7
· •	Debtor(s)	1

	S 342(b) OF THE BANKRUPTCY	. /	
Certificate of	[Non-Attorney] Bankruptcy Petiti	on Preparer	
I, the [non-attorney] bankruptcy petition preparer notice, as required by § 342(b) of the Bankruptcy		ertify that I delivered to the debtor the attached	d
Printed Name and title, if any, of Bankruptcy Pet Address:		Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)	е
x		(Required by 11 U.S.C. § 110.)	
Signature of Bankruptcy Petition Preparer of office partner whose Social Security number is provided			
	Certificate of the Debtor		
I (We), the debtor(s), affirm that I (we) have rece	vived and read the attached notice, as rec	quired by § 342(b) of the Bankruptcy Code.	
Wetter, Ellynn	X /s/ Ellynn Wette	r 7/07/202	20
Printed Name(s) of Debtor(s)	Signature of Deb	tor Da	.te
Case No. (if known)	x	t Debtor (if any) Da	
	Signature of Joir	t Debtor (if any) Da	te

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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IN RE:		Case No.
Wetter, Ellynn	Debtor(s)	Chapter 7
VERIFICATION OF CREDITOR MATRIX		
The above named debtor(s) hereby verify(ies) that the attached matrix listing creditors is true to the best of my(our) knowledge.		
Date: July 7, 2020	_ Signature: /s/ Ellynn Wetter Ellynn Wetter	Debtor
	Lilyiiii Wetter	Debtor
Date:	Signature:	
Joi		Joint Debtor, if any

Amerassist AR Solutions PO Box 26095 #500 Columbus, OH 43226

Best Buy Credit Services Customer Service PO Box 790441 Saint Louis, MO 63179-0441

Capital One Bankruptcy Claims Servicer PO Box 30285 Salt Lake City, UT 84130-0285

Capital One - Bankruptcy Department c/o American Info Source PO Box 54529 Oklahoma City, OK 73154-1529

Care Credit
Synchrony Bank - Bankruptcy Dept.
PO Box 965060
Orlando, FL 32896-5060

DSW - Comenity Bank Bankruptcy Department PO Box 182125 Columbus, OH 43218-2125 JC Penney - Synchrony Bank Bankruptcy Department PO Box 965060 Orlando, FL 32896-5060

Jersey Shore Neurology Associates 1900 State Route 33 Neptune, NJ 07753-4800

Lord & Taylor - Cap One Retail Services Customer Service PO Box 30258 Salt Lake City, UT 84130-0258

Macy's Bankruptcy Dept PO Box 8053 Mason, OH 45040-8053

Meridian Medical Group Primary PO Box 416923 Boston, MA 02241-6923

Merrick Bank Customer Service PO Box 9201 Old Bethpage, NY 11804-9001 Midland Funding, LLC 8875 Aero Dr Ste 200 San Diego, CA 92123-2255

Midland Funding, LLC for Cap One/Lord & Taylor 350 Camino De La Reina, Ste 100 San Diego, CA 92108

Midland Funding, LLC Asignee of Care Credit/Synchrony 350 Camino De La Reina, Ste 100 San Diego, CA 92108

Nordstrom Customer Service PO Box 6555 Englewood, CO 80155-6555

Portfolio Recovery Associates LLC PO Box 12914 Norfolk, VA 23541-0914

Portfolio Recovery Associates LLC For DSW PO Box 12914 Norfolk, VA 23541-0914

Pressler Felt & Warshaw, LLP Attys Midland/Care Credit #W180183 7 Entin Rd Parsippany, NJ 07054-5020

Pressler Felt & Warshaw, LLP Attys For Midland Funding #W180179 7 Entin Rd Parsippany, NJ 07054-5020

Seaview Orthopaedic 1200 Eagle Ave Ocean, NJ 07712-7631

Simon's Agency, Inc PO Box 5026 Syracuse, NY 13220-5026

Target National Bank
Target Credit Services
PO Box 1581
Minneapolis, MN 55440-1581

TD Bank Card Services Customer Service PO Box 84037 Columbus, GA 31908-4037 Thomas Murtha, Esq.
Portfolio Recovery Assoc
120 Corporate Blvd
Norfolk, VA 23502-4962

TJX Rewards - Synchrony Bank Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060